## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 10, 2004 8:00 am
Secretary of State

05-03-2004 90418 039 \*\*\*150.00

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DOCUMENT # P03000080793						<u>.</u>	05-03-20	04 90418	039 ***	"150.00
1. Entity Name LITTLE MAC, INC.										
EII I CE IVINO, IIIO.					1	9				
Principal Place of Business Mailing Address							66427655			
110Z1 CYPRESS ST			11021 CYPRESS ST			ļ	00441010			
TAVARES, FL 32778 TAVARES, FL 32778						i				
										II (
2. Principal Pla	1888	3. Mailing Address	Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			<del> </del>				
Stille, Apt. #, etc.			Guite, Apt. W, 610.		04262004	Chg-P	CR2E03	4 (10/03)		
City & State			City & State		4. FEI Numb	er		App	olied For	
						1 20-	0111201			Applicable
Zip		Country	Zip	Coun	itry	5. Certificate	of Status Desired		8.75 Addi se Regulred	
·	6. Name	and Address of Current	Registered Agent		<del></del>	7. Name and	Address of New F		<del></del>	<u> </u>
	7				Name					
KELLY, NEIL 11021 CYPRESS ST.					Street Address (P.O. Box Number is Not Acceptable)					
TAVARES, FL 32778										
_	ú		•		_		· · ·			
	i				City			FL	Zip Code	)
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept										
the obligations of registered agent.										
SIGNATURE										
	Signature, type	d or printed name of registered agen	end lide if applicable. (NOTE:	Registere	id Agent signature rec	(gritatinian narkw barkut		DATE		
FILE NOWITE FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be										
After May 1, 2004 Fee will be \$850.00 Trust Fund Contribution.										
10. OFFICERS AND DIRECTORS 11.							CHANGES TO OFF	ICEDS AND	NECTOR	1N 11
TITLE P Delete					E	ADOTTONS	CHANGES TO OFF		Change	Addition
NAME	KELLY, I	NEIL		NAM	- 1		_			
STREET ADDRESS	_ · · · · · · · · · · · · · · · · · · ·				EET ADDRESS		•			
CITY-ST-ZIP		S-FL 32778		┺	r-St-ZIP					
TITLE NAME	VELLY (	SHARRON F	Detet#	TITU	1				Change	Addition
STREET ADDRESS		YPRESS ST			EET ADDRESS					
CITY-ST-ZIP		S, FL 32778			/-ST-ZIP					
TITLE	S :		☐ Detet	īnL	£				☐ Change	[] Addition
NAME		AMANDA G		HAA.						
STREET ADORESS CITY-ST-ZIP		YPRESS ST	,		EET ADDRESS V-ST-ZEP					
tms=	IAVARE	S, FL 32778		- THIL					☐ Change	Addition
NAME			☐ Defete	•	<u>.</u> 4€.,\.					- PARISH
STREET ADDRESS					EET ADDRESS					
CITY-ST-ZIP				am	Y-ST-ZIP					
mu:	l		☐ Delete	TITL					Change	Addition
HAME STREET ADDRESS				NAA STR	ME NEET ADDRESS					
CITY-ST-ZIP	1				Y-ST-ZIP					
TITLE	<b>—</b>		□ Delete	TITL	LE				☐ Change	Addition
NAME			_ 2700	MAX		•			-	=
STREET ADDRESS		•			EET ADORESS					
CITY-51-2P	1 1				Y-ST-ZIP		MIN Florido Store	I foreste	E. elase el	-1
l of the co	rporation or	the receiver or trustee em	ith this filling does not qualify for is true and accurate and that m powered to execute this report	as requ	emption stated ature shall have ulred by Chapte	in Section 119.07(3) the same legal effor or 607, Florida Statu	)(i), Florida Statutes oct as if made under les; and that my nar	, i turther cert oath; that I a ne appears ir	ny mat the i m an office n Block 10 o	ntormation or director or Block 11 if
changed, or on an attachment with an address, with all other like empowered.										
SIGNATURE: 1 POLL PRESIDENT APRIL 29 2004 352-343 6313										
EGRATURE AND TYPES ON PRESTED RANG OF BIGMING OFFICER ON CHRECTOR Day Day										
New KELLY										
	ri	I I TO I I TOWN	4			•				